

**FEC  
FORM 3X**

**REPORT OF RECEIPTS  
AND DISBURSEMENTS**  
For Other Than An Authorized Committee

RECEIVED  
2011 AUG -8 AM 9:30  
FEC MAIL CENTER  
Office Use Only

1. NAME OF COMMITTEE (in full) **USE FEC MAILING LABEL OR TYPE OR PRINT** Example: If typing, type over the lines

CALIFORNIA ASSOCIATION OF PHYSICIAN GROUPS (CAPG) PHYSICIANS INDEPENDENT EXPENDITURE COM

ADDRESS (number and street)

915 WILSHIRE BLVD SUITE 1620

Check if different than previously reported. (ACC)

LOS ANGELES

CA

90017

2. FEC IDENTIFICATION NUMBER CITY STATE ZIPCODE

C00492553

3. IS THIS REPORT X NEW (N) OR AMENDED (A)

4. TYPE OF REPORT (Choose One)

(a) Quarterly Reports:

April 15 Quarterly Report(Q1)  
July 15 Quarterly Report(Q2)  
October 15 Quarterly Report(Q3)  
January 31 Quarterly Report(YE)

X

July 31 Mid-Year Report(Non-election Year Only) (MY)  
Termination Report (TER)

(b) Monthly Report Due On:

Feb 20 (M2)

May 20 (M5)

Aug 20 (M8)

Nov 20 (M11) (Non-Election Year Only)

Mar 20 (M3)

Jun 20 (M6)

Sep 20 (M9)

Dec 20 (M12) (Non-Election Year Only)

Apr 20 (M4)

Jul 20 (M7)

Oct 20 (M10)

Jan 31 (YE)

(c) 12-Day PRE-Election Report for the:

Primary (12P)

General (12G)

Runoff (12R)

Convention (12C)

Special (12S)

Election on

in the State of

(d) 30-Day Post -Election Report for the:

General (30G)

Runoff (30R)

Special (30S)

Election on

in the State of

5. Covering Period 01 01 2011 through 06 30 2011

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Donald Crane

Signature of Treasurer

Date

07 31 2011

NOTE : Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C 437g.

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FEC FORM 3X  
(Rev. 12/2004)

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